(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Pondicherry	79	59	68	102	123	112	94	96	95
Andaman & Nicobar Island	92	78	84	66	53	60	84	72	78
All India	113	69	92	118	81	100	115	72	94

Statement-II

State-wise list of Institutes

Sl.No.	State	Name of Institute
1.	Andhra Pradesh	Sweekar Rehabilitation Institute for Handicapped, Secunderabad.
2.	Delhi	Institute of Human Behaviour & Allied Sciences, Delhi
3.	Jharkhand	Central Institute of Psychiatry, Ranchi
4.	Ranchi	Institute for Neuro-Psychiatry & Allied Sciences, Ranchi
5.	Karnataka	Kasturba Medical College, Manipal University, Manipal
6.	Manipur	Regional Institute of Medical Sciences, Imphal, Manipur
7.	Tamil Nadu	Sri Ramachandra Medical College & Research Institute (Sri Ramachandra University), Chennai
8.	Uttar Pradesh	Amity Institute of Behavioural (Health) & Allied Sciences (AIHBAS), NOIDA
9.		Institute of Mental Health and Hospital, Agra
10.	West Bengal	Rashbehari Shiksha Prangan, Calcutta

Infant mortality rate in Delhi

*69. SHRIMATI SYEDA ANWARA TAIMUR:

SHRI VIJAY JAWAHARLAL DARDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that infant mortality rate in Delhi climbed by 50 per cent per year between 2005 and 2007;

(b) if so, whether the existing super-specialty hospitals having health-care facilities in every nook and corner of Delhi are not adequate for growing population; and

(c) whether the targeted beneficiaries of public health-care are ignorant about the facilities available or there is slackness on the part of medical and paramedical staff?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) No Sir, as per the Sample Registration System (SRS) Report of Registrar General of India (RGI), the Infant Mortality Rate (IMR) for State of Delhi for the period 2005-2008 is as under:

Year	IMR
2005	35
2006	37
2007	36
2008	35

(b) Government of National Capital Territory of Delhi has informed that they have about 30 secondary and another 5 tertiary hospitals in the public sector (under various agencies) and infant and child care therapeutic services are satisfactory. Further improvement is also being taken up in selected hospitals under the National Rural Health Mission, with special focus on neonatal care and management of severely malnourished children.

(c) Adequate measures to create awareness amongst the target beneficiaries in regard to services available from public health care system exists at the State level. Details of the measures taken in this regard are enclosed as a Statement (*See* below). The medical and the paramedical staff have been adequately sensitized and trained for efficient delivery of services.

Statement

Steps taken up bv Govt. of NCT of Delhi for increasing community awareness about the infant care related services availability

(a) Holding of Reproductive Child Health (RCH) camps for the vulnerable populations in slums and rural outskirts to provide services including counselling and health education.

(b) Village Health and Nutrition Days (VHND) at the Anganwadis, wherein pregnant and lactating women and children <5 are examined & provided basic health services alongside nutritional supplementation. A total of 1266 such VHNDs conducted so far this year.

(c) Dissemination of health education to families, through 2500 Accredited Social Health Activist (ASHAs) each assigned a population of 2000 in the slums & Jhugi Jhopuri (JJ) clusters.

(d) Counselling and health education to the families through outreach sessions by Reproductive Child Health (RCH) Auxiliary Nurse Midwife (ANMs) & Medical Officers (MOs).

(e) Counselling on child nutrition through Infant and Young Child Feeding (IYCF) Counselling Facilities at major secondary hospitals in the State.

(f) Holding of Special Immunization campaign annually for immunizing earlier missed out children. A Special Immunization and Newborn Care Week for the period 14-21st Nov 2009 has been taken up.

(g) Holding Hepatitis day every year on 4 December for creating awareness. This is being undertaken every year since 1998.

(h) Celebrating Breast feeding week on 1-7th August every year through organizing awareness & service delivery events at almost all the facilities. During 2008 & 2009 State organized 52 & 165 such events.

(i) Integrated Management of Neonatal & Childhood Illnesses (IMNCI) has been started in 3 districts with poor health indicators as per District Level Health Survey (DLHS) 3 report. Training to 110 Medical Officers from primary health facilities and its staff has helped in improved family level and facility level care to infants and young children.

(j) Similarly the pre-service Integrated Management of Neonatal and Childhood Illness (IMNCI) have been initiated in all 5 medical colleges, thus equipping the under graduate students in important aspects of Infant and Young Child care services.

(k) Infant and Young Child Feeding (IYCF) trainings to about 200 Auxiliary Nurse Midwife (ANMs) & Lady Health Visitor (LHVs) and another 159 MOs from the primary urban health facilities have been completed thereby building capacity in quality monitoring & oversight on Reproductive Child Health (RCH) services.

Strategies to control spread of H1N1 virus

*70. SHRI N.K. SINGH:

SHRIMATI SHOBHANA BHARTIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that H1N1 virus is spreading very fast in the country, particularly in the metropolitan cities;

(b) if so, the exact number of patients who died from infection by H1N1 virus, out of the total number of patients reported for treatment;

(c) whether the Central Government's directions to State Governments to handle such cases have been given proper attention; and

(d) if so, the strategies formulated to contain this disease in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (d) 537 patients have died (as on 19.11.2009) due to pandemic influenza A H1N1, out of a total of 16044 laboratory confirmed cases spread over 26 States and four Union Territories.

Proper attention is being paid to the guidelines issued by Ministry of Health & FW, Government of India. Senior officers of the level of Additional Secretaries and Joint Secretaries visited all the states to follow up preparedness and response of the State Government. Areas needing attention were brought to their notice. A planning check list was also provided to the State Governments.